

**Study & Evaluation Scheme
Of
M.S. (Obstetrics & Gynecology)
[Applicable for the Batch 2016 - 17 till revised]**



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P.G. Curriculum

MS (Obstetrics & Gynaecology)

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PG Curriculum

MS (Obstetrics & Gynaecology)

The composition of the department in terms of units, numbers of beds, faculty strength, other staff & number of PG residents will be as per MCI regulations.

- I. **Goals:** The goal of MS course in Obstetrics & Gynecology which also includes Family Welfare Programme is to produce a competent Obstetrician & Gynecologist who -
- Is able to demonstrate comprehensive understanding of Obstetrics & Gynaecology as well as applied disciplines.
 - Has acquired the competence to basic Methodology and procedures pertaining to Obstetrics & Gynecology that are required to practice in community and at all levels of health care system.
 - Has acquired skills effectively in assessing the diagnosis of pregnancy and show expertise in providing effective Antenatal care to the pregnant women and diagnose any deviations from normalcy, for providing timely attention and expert obstetrical care for safe deliveries and preventing/treating complications if any.
 - Has acquired knowledge and skills for diagnosing and treating all Gynaecological problems including Gynaecological cancers.
 - Should be able to provide adequate family planning counseling and measures to the clients.
 - Should be able to demonstrate empathy and have a humane approach towards patients and respect their sensibilities.
 - Is oriented to principles of research methodology.
 - Has acquired skills in educating medical & paramedical professionals.
- II. **Objectives:** At the end of MS course the student should be able to:
- Practice the specialty of Obstetrics & Gynaecology in keeping with the principles of professional ethics with the knowledge and skill required to become a Consultant in the specialty.
 - Perform relevant investigations and procedures for patients.
 - Demonstrate skills in documentation of reports.
 - Demonstrate communication skills of a high order in explaining management and prognosis, providing counseling and giving health education message to patients, families & communities.
 - Facilitate learning of medical/nursing students, & paramedics as Teacher-Trainee.
 - Play the assigned role in implementation of national health programs effectively & responsibly. (including HIV/AIDS, Family Welfare programme, RCH)

- Develop skills as a self-directed learner, recognize continuing educational needs, use appropriate learning resources and critically analyze relevant published literature in order to practice evidence based Obstetrics & Gynaecology.
- Demonstrate competence in basic concepts of research methodology and epidemiology.
- Organize and supervise the desired managerial and leadership skills.
- Function as a productive member of a team engaged in health care, education and research.

III. SYLLABUS FOR POST GRADUATE DEGREE COURSE

MS (Obstetrics & Gynaecology)

OBSTETRICS:

1. Basic sciences:
 - Applied Anatomy of female genito- urinary system, abdomen, pelvis, pelvic floor, anterior abdominal wall and breast.
 - Anatomy of fetus.
 - Fundamentals of reproduction: Gametogenesis, fertilization, implantation & early development of human embryo. Placenta - development, structure, functions. Amniotic fluid - formation and function. Fetal growth & development. Fetal physiology. Birth defects, Genetics, teratology & counseling. Endocrinology of pregnancy & Lactation. Immunology of pregnancy. Molecular Biology.
2. Normal pregnancy, labour & puerperium, Breast feeding and Baby Friendly Hospital Initiative (BFHI).
 - Physiological changes during pregnancy, labour and puerperium.
 - Maternal pelvis and fetal skull.
 - Mechanism of normal labour and management of normal labour.
 - Partographic monitoring of labour progress, early recognition of dysfunctional labour and appropriate interventions during labour including active management of labour.
 - Induction and augmentation of labour.
 - Obstetrical analgesia and anesthesia.
3. Early recognition and prompt management of pregnancy complications, Hyperemesis gravidarum, Abortions, Ectopic pregnancy, Gestational trophoblastic diseases, Pre – eclampsia, eclampsia, Pathophysiology of PIH, Antepartum haemorrhage, Multiple pregnancy, Polyhydramnios, Oligoamnios and Prolonged pregnancy.
4. Medical Disorders of Pregnancy :
 - Anemia in Pregnancy
 - Heart diseases in Pregnancy
 - Diabetes Mellitus complicating pregnancy
 - Liver diseases in Pregnancy
 - Renal disorders in pregnancy
 - Respiratory and CNS Disorders in pregnancy
 - Skin diseases and Psychiatric disorders in Pregnancy
 - Infections in pregnancy (Malaria, Toxoplasmosis, Viral infections (Rubella, CMV, Hepatitis B, Herpes), Syphilis, Leptospirosis and Sexually transmitted infections including HIV and Prevention of Parent to child transmission of HIV infection (PPTCT).

5. Surgical disorders in pregnancy :
 - Acute abdomen, Acute Appendicitis, Intestinal obstruction / perforation and Intussusception.
6. Gynaecological disorders in pregnancy :
 - Fibroids, Ovarian tumors, Carcinoma cervix, Genital prolapse.
7. Hypertensive disorders in pregnancy :
 - Gestational hypertension
 - Pre – eclampsia
 - Eclampsia
 - Chronic hypertension
8. Evaluation of Antenatal & Intra-natal maternal health including fetal surveillance in normal and complicated pregnancies by making use of available diagnostic modalities and plan for safe delivery of the fetus while safeguarding the maternal health.
9. Management of High-risk pregnancy :
 - Post caesarean pregnancy
 - Postdated pregnancy
 - Preterm labour
 - Intra uterine growth restriction (IUGR)
 - Pre mature rupture of membranes (PROM)
 - Blood group incompatibilities including Rh Iso-immunization
 - Recurrent pregnancy wastage
10. Management of abnormal labour :
 - Abnormal pelvis and Soft tissue abnormalities in birth passage
 - Malpresentations and malpositions of fetus
 - Abnormal uterine action
 - Obstructed labour and its complications - rupture of uterus and other morbidities
 - Cervical Dystocia
11. Third stage complications :
 - PPH - Atonic & Traumatic PPH, diagnosis, resuscitation, medical and surgical management including blood component Therapy
 - Retained placenta
 - Uterine inversion
 - Postpartum collapse
 - Amniotic fluid embolism
12. Normal puerperium :
 - Physiology, management of normal puerperium
 - Breast feeding – technique, management, benefits, BFHI

13. Abnormal puerperium :
Puerperal sepsis Thrombophlebitis, Thromboembolism, Mastitis, Puerperal central venous sinus thrombosis, Psychosis.
14. National Health Programs to improve the maternal and child health, social obstetrics and vital statistics.
 - Maternal mortality – Causes & Prevention
 - Perinatal mortality – Causes & prevention
15. Coagulation disorders in obstetrics, Blood and component therapy.
16. Drugs use in obstetric practice : Oxytocics including prostaglandins, Anti hypertensives, Tocolytics, Anticoagulants ,Teratogenic drugs, FDA Classification and Prescription of drugs during pregnancy
17. Operative obstetrics : Decision - making, Technique, Recognition and management of complications, Caesarean Section, Instrumental delivery (Forceps & Ventouse), Manipulations – Version & MRP, Role of destructive surgery, Obstetrics hysterectomy, Internal iliac artery ligation, step wise devascularization of uterus, Brace sutures for atonic uterus.
18. Intensive care in obstetrics for critically ill patients : Fluid and electrolyte balance, Acid – Base Balance, Volume status maintenance, Protecting vital organ function, Assisted ventilation.
19. Provision of safe abortion services: Selection of cases, Techniques, Management of complications, Septic abortion, Criminal abortion, MTP Act, Adoption laws.
20. Neonatology:
 - Neonatal resuscitation.
 - Care of healthy newborn.
 - Care of Preterm babies, SGA neonates and babies born to diabetic mothers.
 - Asphyxia, Respiratory distress syndrome and Meconium aspiration syndrome.
 - Birth trauma : Prevention, Early detection & Management.
 - Neonatal sepsis: Prevention, early detection & Management.
 - Neonatal hyperbilirubinemia: Investigations and Management.
 - Detection of congenital malformations in newborn and make timely referrals for surgical corrections.
 - Management of the common problems in neonatal period.
21. Pre - Conceptional counseling wherever the need arises for planned Pregnancy in special situations.
22. Recent advances in Obstetrics:
 - Medical and surgical management
 - Imaging techniques
 - Intrapartum Fetal Monitoring
 - Prenatal diagnosis of fetal abnormalities and appropriate management.
 - Fetal therapy.
 - PCPNDT Act and its implications.

GYNAECOLOGY:

1. Basic sciences:
 - Development of female genital tract and associated malformations – clinical significance
 - Applied anatomy of female genital tract, abdominal wall and urinary tract.
 - Physiology of menstruation and ovulation
 - Physiology of spermatogenesis
 - Endocrinology – Hypothalamus Pituitary, Thyroid and Adrenal glands, Neurotransmitters.
 - Diagnosis and surgical management of clinical conditions related to congenital malformations of genital tract. Reconstructive surgery in gynaecology.
 - Chromosomal abnormalities and intersex. Ambiguous sex at birth.
 - Reproductive Endocrinology: Evaluation of primary and secondary amenorrhea, management of hyperprolactinemia, Hirsutism, chronic anovulation and PCOD.
 - Thyroid dysfunction
2. Physiology of puberty and adolescence: Gynaecological problems of Puberty and adolescence including sex education
3. Reproductive Tract Infections :
 - Pelvic Inflammatory Disease (PID) : Causes, diagnosis, management
 - Sexually Transmitted Infections and HIV/AIDS: Prevention, Diagnosis and management
 - Genital Tuberculosis :Diagnosis & management
4. Supports of pelvic organs, Genital prolapse - Aetiology, classification, diagnosis and surgical management of genital prolapse.
5. Endometriosis and Adenomyosis - Diagnosis & management.
6. Common urological problems in gynaecology :
 - Physiology of Micturition
 - Voiding difficulties
 - SUI, Urodynamics, diagnosis, investigations and management of SUI
 - VVF – surgical repair of genital fistulae
 - Ureteric and bladder injuries
 - Retention of urine especially in menopausal women – causes, diagnosis and management
7. Infertility evaluation and management :
 - Use of ovulation induction methods
 - Tubal factors of Infertility – Tubal Patency tests and Tubal microsurgery
 - Assisted reproduction techniques
 - Management of immunological factors in infertility
 - Surrogacy
 - Adoption law, medico-legal and ethical issues

8. Abnormal Uterine Bleeding – Aetiology, Diagnosis and Management including Puberty menorrhagia.
9. Benign tumors of the uterus : Fibromyoma of uterus
10. Benign tumors of Ovary.
11. Screening for genital malignancies: Cytology, Colposcopy, imaging and tumour markers. Management of pre malignant lesions.
12. Benign conditions of cervix, vulva and vagina.
13. Malignant tumors of the genital tract:
 - Carcinoma of cervix
 - Carcinoma of Endometrium
 - Malignant tumours of Ovary & Fallopian tube
 - Malignant lesions of vulva and vagina
14. Principles and practice of oncology in gynaecology : Chemotherapy, Radiotherapy, and Palliative management.
15. Physiology of menopause, management of menopause, prevention of complications & HRT
 - Postmenopausal bleeding : Aetiology, investigations, diagnosis and management
 - Postmenopausal Osteoporosis : Diagnosis and management
16. Newer Diagnostic aids :USG, interventional sonography, other imaging techniques, Colposcopy, Liquid Based Cytology (LBC) including HPV- DNA, Nucleic Acid Assay (NAA) based molecular diagnosis.
17. Gynaecological endoscopy
 - (i) Hysteroscopy – diagnostic and operative,
 - (ii) Laparoscopy – diagnostic, simple surgical procedures including laparoscopic tubal occlusion
18. Sexual Assault: Medico legal aspects, Ethics, Communications and Counseling.
19. Operative Gynaecology : Selection of cases, techniques of minor and major gynaecological procedures, recognition and management of complications.
 - Abdominal and vaginal hysterectomy
 - Surgical procedures for genital prolapse
 - Endometrial ablative techniques.
 - Surgical management of benign and malignant genital neoplasm.
 - Repair of genital fistulae
 - Surgical procedures SUI
 - Operative Endoscopy – Laparoscopic & Hysteroscopic operative procedures.
20. Special groups: Pediatric and adolescent Gynaecology, Geriatric Gynaecology.
21. Family Planning:
 - Demography and population Dynamics.
 - Contraception: Temporary methods, Permanent methods (vasectomy and female sterilization), Legal issues.
 - MTP Act and procedures of MTP in first & second trimester. (Recent Amendments, Legal/ethical issues)
 - Emergency contraception.
22. Recent advances in Gynaecology : Diagnostic and Therapeutic including Evidence Based management, New development & future research work in contraceptive technology.

IV. Teaching & Training Program

A) General Principles:

- Learning in postgraduate programme is essentially self-directed and primarily emanating from clinical and academic work. The formal teaching sessions are merely meant to supplement this core effort.
- Postgraduate training is skills oriented and acquisition of practical competencies will be the keystone of postgraduate medical education
- Log Books to be duly maintained for their clinical and academic activities on day – to – day basis and weightage to be given in the examination as a part of internal assessment.

B) Teaching Sessions:

- In addition to daily routine of reporting & working with consultants in every Unit, there will be one hour formal teaching session for PG students as per the teaching schedule.
 - Seminar
 - Journal Club
 - Clinical Grand Rounds
 - Clinico – Pathological Conferences (CPC)
 - Case presentation
 - Inter departmental meetings / Guest Lectures
 - Dissertation Review meetings
 - Maternal/Perinatal Mortality Review meetings
- In addition the PG students will have to attend UG teaching classes (Theory & tutorials) to gain basic theoretical knowledge of Obstetrics & Gynaecology.
- Self study on all aspects of Obstetrics & Gynaecology mentioned in syllabus.
- Learning all basic skills in Obstetrics & Gynaecology like, attending normal and operative deliveries, performing minor procedure like D&C, D&E, MTP (under consultant's supervision), cervical biopsy, taking PAP smear, Colposcopy (under guidance) etc.,
- Teach UG (MBBS) students as & when assigned (clinics & Tutorial classes)
- Undertake classes for nursing & paramedical staff.

C) PG Teaching Schedule:

The suggestive departmental teaching schedule is as follows:

1	Journal Club	:	Once a week
2	Case Discussion	:	Once a week
3	Seminar	:	Once a week
4	Clinical grand Rounds	:	Once a week
5	Dissertation review meetings	:	Once a month with respective guides Once every 4 months in the department
6	Inter departmental meetings / Guest lectures	:	Once a month
7	Maternal Mortality review meetings	:	Once a month
8	Central session on CPC / Guest lecturers	:	Once a month
9	PG orientation programme, teaching on research methods, thesis writing, medical ethics, Biostatistics, etc.,	:	Once during their First year of the course

V. Clinical Postings

- The Post-Graduate Residents must undergo the following rotational training during their 3 years course towards MS degree.

Unit Rotation	:	The postgraduate students are periodically posted on rotation to all the three units.
Labour Room	:	Unit wise (8 - 9 duties per month) (Total - 10 months)
Allied Posting		
Blood Bank	:	2 weeks (I year)
Neonatology	:	2 weeks (I year)
Radiology	:	2 weeks (II year)
Anaesthesia		2 weeks (II year)
Total	:	36 months

VI. Job Responsibilities

A) For Clinical Work:

- Should have adequate Knowledge and skill to manage Antenatal, Postnatal as well as Gynaecology OPD.
- Will be expected to advice for relevant investigations and interpret all investigative data.
- Should be able to make at least near correct Diagnosis of Obstetric & Gynaecological problems in the OPD and at emergencies, send relevant investigation to reach a final diagnosis so as to formulate correct management plan.
- Should be able to perform deliveries, take correct decisions timely for operative interventions to ensure safety for both the mother and the unborn baby.

B) For Teaching :

- Should be able to take a classes using audiovisual aids for the Undergraduates & Nursing Staff.
- Should be able to make short lectures under senior teacher's supervision.
- Should have learnt to prepare Power-Point presentations.
- Should have learnt to frame multiple - choice questions.
- Should attend undergraduate theory and practical classes.
- They should play an active role in teaching Undergraduate clinical and practical classes.

C) For Research Work:

- Should have skill to search references from journals and present Journals.
- Should have basic computer skills.
- Will be expected to be familiar with standard methods of preparing manuscripts, illustrations and bibliography for Paper / Poster presentations & publications.

VII. Thesis

- Every candidate shall carry out work on an assigned research project under the guidance of a recognized postgraduate teacher; the project shall be written and submitted in the form of a Thesis.
- The Synopsis for the thesis has to be submitted within 6 months of joining the course. The synopsis has to be cleared by the College Research Committee and the Ethical Committee before the topic is approved for the thesis work. The contents of the Synopsis will be as follows:

- (i) Title of the Topic
- (ii) Bio-data of the candidate
- (iii) Certificate from HOD
- (iv) Certificate from Guides and Co-Guides
- (v) Introduction of the topic including the need for the study specifying the Aims and Objectives of the study

- (vi) Review of Literatures
- (vii) Material and Methods
- (viii) Data analysis Plan
- (ix) References , more than 10 in Vancouver Style
- (x) Patient information sheet & Consent statement
- (xi) Proforma

The students will identify (i) Relevant problem (ii) Conduct a critical review of literature (iii) Formulate a hypothesis (iv) Determine the most suitable study design (v) State the Aims & objectives of the study (vi) Prepare the study protocol (vii) Undertake the study according to the protocol (viii) Analyze and interpret research data using appropriate Statistical tools.(ix) Discussion comparing the results of the thesis work with other established work and draw Conclusions (x) Write the Thesis

There will be periodic assessment of the thesis work by the respective guides as well as the departmental faculty during dissertation review meetings. Thesis shall be submitted to the university six months before the commencement of university theory examination (May/June session) that is, 30th November of the preceding year of examination.

The thesis will be evaluated by three experts (Two Externals and One Internal) in the field. Approval of thesis will be a pre-requisite for appearing in the university examination.

VIII. Assessment

❖ Formative Assessment :

All the PG residents will be to be assessed daily for their academic activities and also periodically by internal assessment examinations. Evaluation of the residents will be done taking in to consideration the knowledge and acquisition of skills, competency and attitudes.

❖ Summative Assessment :

- The university MS (OBG) examination will be conducted by two external and two Internal Examiners.
- The examinations shall be organized on the basis of marking system to evaluate and to certify the candidate's level of knowledge and competency of skills at the end of the training.
- The pass percentage will be 50%.
- Candidate will have to pass theory and practical examinations separately.

Scheme of Examination:**A) Theory (4 papers, 100 marks each, Duration - 3 hours.)**

Paper I	:	Basic sciences in Obstetrics & Gynaecology	100
Paper II	:	Clinical Obstetrics including Neonatology	100
Paper III	:	Clinical Gynecology including Fertility regulation	100
Paper IV	:	Recent advances in Obstetrics & Gynaecology	100
Total Theory Marks			400

B) Practical & Viva Voce Examination (Total = 400)

TITLE	MARKS
Obstetric cases - 2 (Long Case 1- 100 Marks; Short Case 1 - 50 Marks)	150
Gynaecology cases - 2 (Long Case 1- 100 Marks; Short Case 1- 50 Marks)	150
Obstetrics Viva (Specimens, Dummy Pelvis for obstetric maneuver, Instruments, operations, CTG, Drugs, USG including Log Book)	50
Gynaecology Viva (Specimens, Instruments, operations, X-ray, USG, CT/MRI, drugs, contraception including Dissertation)	50
Total (Practical & Viva)	400

IX. Model Question Papers

Paper – I: Basic sciences in Obstetrics & Gynaecology.		
Total marks : 100		Duration : 3 hours
All questions to be answered		
Draw suitable diagrams wherever necessary.		
Long Questions		(2X20 = 40 marks)
Q.1.	Discuss Physiology of ovulation and menstruation.	20 Marks
Q.2.	Discuss the development of female genital system and add a note on Mullerian anomalies	20 marks
Short Questions		(6X10 = 60 marks)
Q.3.	Discuss the course of pelvic part of female ureter and its surgical importance.	10 marks
Q.4.	Discuss the Aetiopathophysiology of Pelvic inflammatory Diseases.	10 marks
Q.5.	Discuss iron metabolism in pregnancy.	10 marks
Q.6.	Discuss teratogenicity of drugs during pregnancy.	10 marks
Q.7.	Discuss the role of fetus in the physiology of labour.	10 marks
Q.8.	Discuss the immunological causes of recurrent pregnancy loss.	10 marks

Paper - II: Clinical Obstetrics including Neonatology.		
Total marks : 100		Duration : 3 hours
All questions to be answered		
Draw suitable diagrams wherever necessary.		
Long Questions		(2X20 = 40 marks)
Q.1.	Critically appraise various screening tests to detect GDM. Discuss the management of GDM during pregnancy, labour and puerperium.	20 Marks
Q.2.	Classify the hypertensive disorders of pregnancy. Discuss the diagnosis and management of a case of severe Pre – eclampsia.	20 marks
Short Questions		(6X10 = 60 marks)
Q.3.	Antepartum fetal surveillance	10 marks
Q.4.	Management of Rh isoimmunized Pregnancy	10 marks
Q.5.	Management of Preterm labour	10 marks
Q.6.	Peripartum Cardiomyopathy	10 marks
Q.7.	Discuss the management of Atonic PPH	10 marks
Q.8.	Discuss the diagnosis and management of Placenta Previa	10 marks

Paper - III: Clinical Gynaecology & Fertility regulation.		
Total marks : 100		Duration : 3 hours
All questions to be answered		
Draw suitable diagrams wherever necessary.		
Long Questions		(2X20 = 40 marks)
Q.1.	Discuss physiology of continence of urine females. Discuss the diagnosis and management of stress urinary incontinence.	20 Marks
Q.2.	Critically appraise the cervical cancer screening modalities. Discuss the management of invasive carcinoma of cervix	20 marks
Short Questions		(6X10 = 60 marks)
Q.3.	Discuss the evaluation of Postmenopausal bleeding.	10 marks
Q.4.	Critically appraise the various tests for assessing tubal patency in female infertility	10 marks
Q.5.	Briefly discuss the conservative management options for AUB	10 marks
Q.6.	Discuss the medical management of Endometriosis	10 marks
Q.7.	POPQ.	10 marks
Q.8.	Briefly discuss the role of various Imaging Techniques in the diagnosis of gynaecological disorders.	10 marks

Paper - IV: Recent advances in Obstetrics & Gynecology.		
Total marks : 100		Duration : 3 hours
All questions to be answered		
Draw suitable diagrams wherever necessary.		
Long Questions		(2X20 = 40 marks)
Q.1.	Discuss the various modalities for antenatal screening and diagnosis of fetal aneuploidy.	20 Marks
Q.2.	Discuss the Pathophysiology of menopausal transition. Discuss the role of Hormone replacement therapy	20 marks
Short Questions		(6X10 = 60 marks)
Q.3.	Diagnosis & Conservative management of unruptured tubal ectopic pregnancy	10 marks
Q.4.	Selective Progesterone Receptor Modulators in Obstetrics & Gynaecology.	10 marks
Q.5.	Discuss the role of uterine artery Doppler in prediction of pre-eclampsia. Add a note on prevention of Preeclampsia.	10 marks
Q.6.	Oophorectomy - A challenging decision during Hysterectomy.	10 marks
Q.7.	Fetal fibronectin & cervical ultrasound in prediction of preterm labour.	10 marks
Q.8.	Endometrial receptivity tests in IVF- ET.	10 marks

X. Recommended Books & Journals:

Obstetrics:

- Williams Obstetrics.
- Fernando Arias - High Risk Pregnancy
- Ian Donald - Practical Obstetrics problem.
- Munro-Kerr's Operative Obstetrics.
- Textbook of Obstetrics by D.C Dutta
- Human Labour and Birth - Oxorn Foote
- Medical Disorders in Pregnancy by De Swiet.
- Obstetrics by Ian Donald.
- Post Graduate Obstetrics & Gynaecology by FOGSI, edited by Dr. N. Malhotra & Daftary
- High Risk pregnancy by James.
- Recurrent Pregnancy Loss – Mala Arora
- Operative Obstetrics by Douglas.
- Callen's Ultrasonography in Obstetrics and Gynaecology
- Donald School Textbook of Ultrasonography in Obstetrics and Gynaecology
- Progress in OBGY – Studd.(Series)
- Recent Advances in Obst /Gyn –Bonnar.(Series)
- FOGSI Books.

Gynecology:

- Novak's textbook of Gynecology.
- TeLindes Operative Gynecology.
- D.C.Dutta's Textbook of Gynecology and contraception.
- Bereks gynecological Oncology.
- Gynecology by Saxena
- Jeffcoat's Principles of Gynaecology.
- Reproductive Endocrinology by Speroff.
- Infertility by Inslar.
- Endocrinology by Rajan.
- Gynaecology by Gold
- Novaks text book of Gynaecological Pathology.
- Bonney's Text Book of Operative Gynaecology
- Shaw's Text Book of Gynaecology
- Shaw's Text Book of Operative Gynaecology
- Post Graduate Obstetrics & Gynecology by Dewhurst.
- Bonney's Text book of Operative Gynaecology
- Female Pelvic Medicine & Reconstructive Surgery - Rebecca G Rogers
- Laparoscopic Surgery in Infertility & Gynaecology -Nutan Jain
- Urogynaecology and Pelvic Reconstructive Surgery – Manidip Pal
- Laparoscopic Management of Prolapse and Stress Urinary Incontinence
- Family Planning Practices by S.K. Chaudhary.

- C.S.Dawn's book on Gynaecology & Contraception.
- Reproductive Endocrinology by Speroff.
- Clinical Gynaecological Endocrinology and Infertility – Fritz M A.
- The Infertility Manual - Kamini A Rao.
- Principles and Practice of Assisted Reproductive Technology – Kamini A Rao.
- Endoscopy in Infertility - Kamini A Rao.

Journals / Periodicals:

- Clinics in Obstetrics & Gynecology.
- North American clinics in Obstetrics & Gynecology.
- Journal of Obstetric & Gynaecological society of India.
- American Journal of Obstetrics & Gynaecology.
- British Journal of Obstetrics & Gynaecology.
- Fertility & Sterility series.
- Year books of Obstetrics & Gynaecology Annals.
- Obstetrical & Gyneacological Survey.
- WHO Recommendations.
- FOGSI Focus.
- NHS reports.
- ACOG,RCOG, ICOG, NICE,FOGSI Guidelines.

